

**Public Health Steps Up Challenge:  
The Michigan Surgeon General's Pedometer-based Walking Challenge  
for Michigan's Public Health Employees**

**Final Evaluation Report**

**Office of the Surgeon General  
Michigan Department of Community Health  
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## Executive Summary

The Public Health Steps Up Challenge was a 16-week walking competition initiated by the Office of the Surgeon General at the Michigan Department of Community Health. A total of 2,471 employees at Michigan's 45 local health departments, the Michigan Department of Community Health (MDCH), the Michigan Public Health Institute (MPHI), and the Michigan Association of Local Public Health (MALPH) registered for the Challenge.

A post-Challenge survey was sent to all registered participants to collect information about participant involvement and behavior change, the Challenge website, and recommendations for future programs. The results are presented in this report. Written responses and anecdotes are presented in shaded boxes throughout the report.

Major findings include:

- A total of 631 surveys were returned, for a response rate of (26%) based on the number of registered participants. The majority of respondents were white females aged 36-55 years.
- 454 respondents used one of the complementary pedometers that were donated to the program; however, many respondents commented about their poor quality. Some respondents even dropped out of the Challenge early because they were so frustrated with their pedometers. Others, however, purchased their own pedometer so they could continue with the Challenge.
- About 59% (N=372) of respondents stated that they had not worn their pedometer post-Challenge.
- The number of respondents reporting 20 to 39 minutes of activity in a typical day increased from pre- to post-Challenge, while the number of respondent reporting less than 20 minutes per day decreased.
- Approximately 23% of respondents reported an improvement in physical activity level during the Challenge. Almost 15% of respondents reported a higher level in the beginning followed by a decrease, and nearly 9% of respondents reported dropping out before the Challenge ended.
- Although a BMI calculator and information were provided on the Challenge website, 55% (N=347) of respondents reported not knowing their BMI before the challenge. Of those, only nine respondents reported knowing their BMI after the Challenge; 295 reported that they still didn't know their BMI after the Challenge.
- The majority of respondents prefer taking the stairs, parking further away from entrances, and walking after work to increase their number of steps.
- The majority of respondents (72%) stated that they reported their steps for nine or more weeks.
- Overall, respondents were satisfied with the Challenge website. A majority of respondents agreed or strongly agreed that the website was easy to navigate, the format and design were appealing, registration was easy, entering steps online was easy, and adequate support was provided for questions or problems.
- Pedometer usage, access to appropriate places to walk, and internal/self-motivation were seen as both keys to success and obstacles to success in the Challenge.
- Thirty-seven percent of respondents recalled seeing motivational signs, posters, or reminders related to the Challenge (e.g., encouragement to use the stairs instead of the elevator or reminder to log steps) posted at their worksite.

- Over 60% of respondents reported setting a goal, such as taking the stairs instead of the elevator, getting 10,000 steps a day, and convincing family members to walk with them.
- Of the 381 respondents who set a goal at the start of the Challenge, just over half reported achieving that goal. Of the half that did not achieve their goal, 79% felt as if they were still successful for one reason or another.
- Over half (53%) of the respondents felt the length of this Challenge (16 weeks) was appropriate while 35% felt it was too long.
- When asked whether or not they would participate in a program similar to the Public Health Steps Up Challenge again, an overwhelming majority (85%) said they would.
- A majority of respondents indicated they would prefer to participate in a program like Public Health Steps Up in the spring and/or summer months, and the workplace was the most preferred location for this type of program.

# Public Health Steps Up Challenge

## Final Evaluation Report

### Introduction

This report presents the results of an evaluation of the Michigan Surgeon General's **Public Health Steps Up Challenge**, a pedometer-based healthy lifestyles competition for Michigan's public health employees.

### Background

#### Michigan Surgeon General

In Michigan Governor Jennifer Granholm's 2004 State of the State address, she laid out a seven-point plan to grow Michigan's economy and preserve and improve quality of life in Michigan. Healthy people and healthy, productive communities go hand-in-hand. If we do not do something about rising health costs, for example, we cannot expect to make much progress toward a stronger economy and improved quality of life in Michigan. Governor Granholm took an important first step by appointing Dr. Kimberlydawn Wisdom, MD, as Michigan's first Surgeon General to address Michigan's less than desirable health status.

#### Healthy Michigan 2010: Surgeon General's Health Status Report

To achieve the Governor's goal of a stronger, healthier Michigan, the Office of the Surgeon General (OSG) in the Michigan Department of Community Health took the initial step of collaborating to produce the **Healthy Michigan 2010: Surgeon General's Health Status Report**. This evidence-based, scientific report, released in April 2004, highlights the health status of Michigan citizens. While it is not - and could not be - an exhaustive review of every area of concern, it is the first step in documenting Michigan's current health status, and it helped align Michigan's health status goals with the Healthy People 2010 goals for the nation.

This report takes a comprehensive look at a full range of health indicators – among them chronic diseases, lifestyle choices, health care coverage, mental health and injury prevention.

#### Michigan Surgeon General's Prescription for a Healthier Michigan

The second important step was the **Michigan Surgeon General's Prescription for a Healthier Michigan**, released in May 2004. The Prescription provides a clear picture of where we are and where we need to go to preserve, protect and promote Michigan's health. The Prescription has two major components—strategic priorities and recommendations for action.

In the Prescription, the Surgeon General calls on the education, business, and faith-based communities, health care providers, institutions and organizations and state and local public health agencies; and the general community including policymakers to disseminate information, teach health-building skills, develop supportive policies, and provide incentives for helping families preserve and maintain their own health.

To make a significant difference in the health of Michigan citizens, the Surgeon General outlined four strategic priority areas in the Prescription:

- 1) Promoting Healthy Lifestyles
- 2) Protecting Families
- 3) Protecting Communities
- 4) Eliminating Health Disparities

### Promoting Healthy Lifestyles in Michigan

People in Michigan are among the most overweight in the United States. As of 2002, approximately 62% of Michigan's adults were either overweight or obese, which increases their risk for over 30 preventable chronic diseases and conditions, including the leading causes of death: heart disease, cancer, stroke and diabetes. ***These chronic diseases are rooted in three unhealthy lifestyles-- unhealthy eating, physical inactivity, and tobacco use.***

Michigan adults and children are not leading healthy lifestyles. For example:

- Seventy-seven percent of adults and 79% of youth do not eat the recommended minimum of five servings of fruits and vegetables a day;
- Only 4% of adults engage in four essential healthy lifestyles: healthy weight, adequate fruit and vegetable intake, adequate physical activity and no smoking;
- In 2002, 76% of Michigan adults reported either less than the recommended 30 minutes of physical activity five or more days a week or none at all;
- Tobacco kills more people in Michigan than AIDS, alcohol, automobile crashes, fires, drugs, murders, and suicides combined;
- Approximately 24% percent of Michigan adults smoke each day; and
- Every day, more than 4,000 children under age 18 try smoking and another 2,000 children become new daily smokers.

Unhealthy lifestyles also have an enormous economic impact. Medical care costs consume nearly 50% of corporate profits for many employers. In response, businesses are passing on a portion of their increasing health care premium costs to their employees. In Michigan, physical inactivity alone contributes to the loss of approximately 20 workdays per employee, the loss of productivity while on the job, and a statewide cost of \$8.9 billion annually. Failure to address these costs could lead to a Michigan business climate that is unattractive to new employers or to business expansions. Failure to address the economic consequences of unhealthy lifestyles will also increase the cost of maintaining the Michigan Medicaid Program.

### Michigan Steps Up

The ***Michigan Steps Up*** campaign addresses the first of four strategic priority areas outlined in the Prescription: Promoting Healthy Lifestyles. This includes arresting adult and pediatric obesity by increasing physical activity and improving healthy eating, and reducing and ultimately eliminating tobacco use.

Although a number of neighborhood, community, and state-level healthy lifestyle activities are already taking place across the state, those efforts have been fragmented. Many consumers say that all the different programs and messages they encounter confuse them. They want a simple consistent message that tells them clearly what they need to do. The Michigan Steps Up campaign will provide that consistency to existing and new programs and create a social movement for change in the state.

The slogan of Michigan Steps Up encapsulates the goals of the initiative: "Move More, Eat Better, and Don't Smoke." The Campaign is designed to include multiple tools for improving health status and promoting healthy lifestyles - with the goals of increasing community capacity, sharing resources, decreasing risk factors and ultimately improving outcomes.

Michigan Steps Up features an interactive website with physical activity, nutrition, and tobacco cessation information and health tracking tools. The website was launched to citizens statewide on February 3, 2005. Additional campaign components include a media campaign, conferences, competitions, and the creation of assessment tools.

On June 29<sup>th</sup>, 2004, the Surgeon General convened over 200 key individuals representing five stakeholder groups (business, health care, education, faith-based, and community sectors) at a Michigan Steps Up Call to Action event. The Surgeon General called on stakeholder workgroups to make a commitment to support the campaign, to recruit the support of their affiliates and partners and the individuals they serve, to review evidence-based recommendations that their organizations can implement in support of the campaign, to develop measurable objectives, and to submit a report. Since

then, workgroups have met a number of times and soon, resources will be available on the Michigan Steps Up website.

### Healthy Lifestyle Competitions

To date, the Office of the Surgeon General has launched three pedometer-based walking challenges to promote physical activity and a healthy lifestyle to various groups across Michigan. The premise behind each competition is to provide incentive for individuals and teams to increase their daily activity by monitoring the number of steps they take in a day using a pedometer and a website to log their steps and see how they compare to others. Although the Surgeon General promotes 10,000 steps a day, any improvement from an individual's average level of activity is encouraged. The most important aspect is participation, for a healthy lifestyle should last a lifetime rather than a few weeks or months.

The first competition, the **Legislative Health Challenge**, was launched on December 8, 2003. In this 16-week program, members of the State Senate, House and Executive Office/Cabinet received pedometers and journals to track their steps. For fun, the Surgeon General threw in a bit of friendly competition between the three branches of government. The Executive Office was named the overall winner of the Challenge.

The second competition, the **Walk by Faith Pedometer Challenge** was piloted with faith leaders in Detroit and Flint area churches. The church leaders were encouraged to "lead by example" and spread the healthy lifestyle message to their congregations and surrounding community. Over 100 leaders statewide participated in the challenge, and the team from Detroit was named the overall winner.

## **Public Health Steps Up Challenge**

On September 6, 2004, the Office of the Surgeon General launched the third Michigan Steps Up walking challenge, called the **Public Health Steps Up Challenge**. The Surgeon General charged public health employees across Michigan to serve as role models for healthy lifestyles by participating in this challenge. Participants included: Employees at Michigan's 45 local health departments, the Michigan Department of Community Health (MDCH), the Michigan Public Health Institute (MPHI), and the Michigan Association of Local Public Health (MALPH).

The Challenge began on September 6, 2004 (the day of the Mackinaw Bridge Walk/Run) and lasted for 16 weeks, ending on December 26, 2004. Challenge participants wore pedometers to track their steps everyday. Many participants wore pedometers donated by the Michigan Association of Health Plans. Using the Public Health Steps Up website ([www.mihealthtools.org/localhealth](http://www.mihealthtools.org/localhealth)), participants were able to enter their steps each week, obtain feedback, and monitor their personal step progress throughout the challenge.

Participants' name and email addresses were collected at time of registration. Program staff used this information to communicate updates, reminders, and special announcements related to the Challenge. The website privacy statement assured participants that their email address and name would never be shared with anyone except program staff and consultants administering and coordinating the Challenge and the website and the team captain(s) at their place of employment, unless participants provided express written permission. In addition, participants were assured that their personal step information would never be associated with their name or with any other personal identifying information unless they provided written permission. Participants were also assured that they had the option to opt-out of the program at any time and to be removed from the Challenge email list at any time.

### Challenge Results

A total of 2,471 employees registered for the challenge. A small percent of these participants did not register online due to Internet access problems or other worksite issues. Those individuals reported their

weekly step totals to a team captain, who in turn reported the total team steps and number of participants reporting steps for the week to the Challenge coordinator.

While 2,471 employees originally registered, only about 35 percent (N=864) participated on average each week. The highest participation rate (61%) occurred in Week 1 (September 6-12, 2005). The lowest participation rate (28%) occurred in Week 16 (December 21-27, 2005).

By the end of the 16-week program, participants logged a total of **802,525,762** steps. Huron County Health Department won the Challenge. The 11-member team had the highest participation rate (99.4%) of all teams. Together, the team logged a total of 12,651,715 steps, which equals app. 6,326 miles (based on an average calculation of 5 miles per 10,000 steps).

St. Clair County Health Department was the runner-up team. The 46-member team had an 85.2% participation rate. Together, they logged a total of 47,254,726 steps, or about 23,627 miles.

Winners were determined using an algorithm that included the following factors:

- The average number of steps taken per week per health department or organization. The higher the average (per capita), the higher the score for the health department/organization.
- The consistency of participation from week to week. The higher the weekly percent participation, the higher the score.
- Improvement over the course of the event.

The most important factor was participation. Participants were encouraged to remain active, even during challenging times like holidays, adverse weather, etc. through regular communication from Challenge staff and the Public Health Steps Up website.

## **Post-Challenge Evaluation**

The Office of the Surgeon General conducted a post-Challenge evaluation to collect information about participant involvement in the Public Health Steps Up Challenge, participant behavior change, the Challenge website, and other aspects of the Challenge. Baseline (pre-Challenge) data was not collected due to time, technological, and budgetary constraints.

## **Methods**

Subjects were identified using the database of registered participants in the administrative section of the Public Health Steps up website. This section of the website is accessible only to project staff and web programmers. Project staff from the Office of the Surgeon General attempted to administer a survey to every registered participant. A packet was mailed to team captains at each registered organization. Each packet contained:

- 1) An introductory letter for team captains that listed the names of all registered Public Health Challenge participants from that organization and instructions for distributing the survey to subjects and returning surveys to MDCH.
- 2) A paper survey for each registered participant with instructions and a consent statement.

Team captains delivered a survey to each person on their list. Respondents choosing to complete the surveys were asked to do so on their own time, in their preferred setting.

A consent statement was included in the introductory section of the first page of the survey. Michigan Steps Up lapel pins were offered to everyone completing and returning a survey.

Completed surveys were mailed to the Office of the Surgeon General. The number of completed surveys received from each team was tracked and lapel pins were mailed to team captains to distribute to team members who completed surveys. Survey data were entered and analyzed by Office of the Surgeon General staff.



## Results

### Respondent Demographics

A total of 631 surveys were returned, for a response rate of (26%) based on the number of registered participants. The majority of respondents were white females aged 36-55 years.

**Table 1: Respondents by Gender, Age, and Race/Ethnicity**

| Gender      | Number | Percent |
|-------------|--------|---------|
| Male        | 74     | 12%     |
| Female      | 537    | 85%     |
| No Response | 20     | 3%      |
| Total       | 631    | 100%    |

| Age           | Number | Percent |
|---------------|--------|---------|
| 25 or younger | 14     | 2%      |
| 26 to 35      | 97     | 15%     |
| 36 to 45      | 169    | 27%     |
| 46 to 55      | 236    | 37%     |
| 56 to 65      | 92     | 15%     |
| Over 65       | 3      | 0%      |
| No Response   | 20     | 3%      |
| Total         | 631    | 100%    |

| Race/Ethnicity                            | Number | Percent |
|---|--------|---------|
| American Indian or Alaska Native          | 2      | 0%      |
| Asian                                     | 6      | 1%      |
| Black or African American                 | 28     | 4%      |
| Hispanic or Latino                        | 8      | 1%      |
| Native Hawaiian or Other Pacific Islander | 1      | 0%      |
| White                                     | 547    | 87%     |
| Other                                     | 2      | 0%      |
| Multiracial/ethnic                        | 5      | 1%      |
| No Response                               | 32     | 5%      |
| Total                                     | 631    | 100%    |

### Pedometer Use

A total of 259 respondents reported that they owned a pedometer prior to the Challenge start date of September 6, 2004, while 356 respondents said they did not own a pedometer prior to the Challenge. Sixteen respondents did not answer this question.

Table 2 shows how pedometer use increased during the Challenge for those respondents who stated that they owned a pedometer prior to the Challenge. Nineteen percent of respondents maintained their current pedometer use (all were routine users) and 76% increased their pedometer usage during the Challenge.

**Table 2: Change in pedometer use from *before* the Challenge to *during* the Challenge**

| Pedometer Usage  | Number | Percent |
|------------------|--------|---------|
| Maintained Usage | 48     | 19%     |
| Increased Usage  | 196    | 76%     |
| No Response      | 15     | 6%      |
| Total*           | 259    | 100%    |

*\* Totals are based on number of respondents who said they owned a pedometer prior to the Challenge, not the total number of survey respondents.*

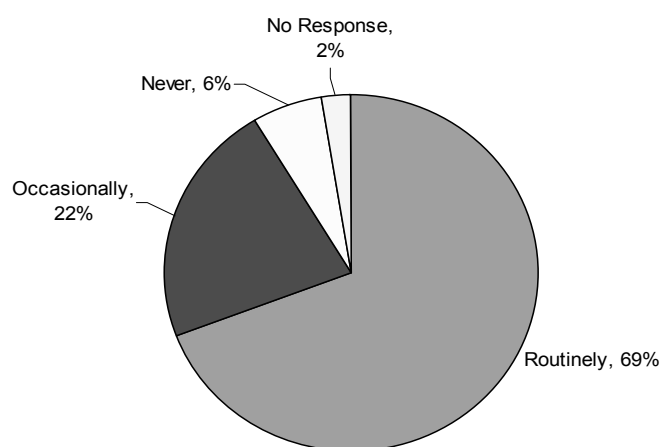
Table 3 and Figure 1 show pedometer use during the Challenge for those respondents who stated they did not own a pedometer prior to the Challenge.

**Table 3: Pedometer use during the Challenge by new pedometer owners**

| Pedometer Usage | Number     | Percent    |
|-----------------|------------|------------|
| Routinely       | <b>257</b> | <b>69%</b> |
| Occasionally    | 83         | 22%        |
| Never           | 23         | 6%         |
| No Response     | 9          | 2%         |
| Total*          | 372        | 100%       |

*\* Totals are based on number of respondents who said they did not own a pedometer prior to the Challenge, not the total number of survey respondents.*

**Figure 1. Frequency of Pedometer Use by New Pedometer owners**



Participants were offered a complementary pedometer donated by the Michigan Association of Health Plans, with the expectation that those who already owned a pedometer would not take one. About 72% (N=454) of respondents indicated that they used one of these pedometers during the Challenge.

Many respondents provided written comments about the complimentary pedometers. In general, those comments focused on the poor quality of the pedometers; some respondents even indicated that the quality of the pedometer turned them away from participating in the Challenge. However, many respondents stated that when their complimentary pedometer broke, they purchased a new one so they could continue participating in the Challenge.

**“[The pedometers were] too cheap. They even “reset” throughout the day.....I went through three pedometers. One co-worker's broke and she won't buy another one; she had a birthday, so I bought her one, so she continued with the contest/challenge.”**

**“I would participate in a similar Challenge if equipment was properly functioning.”**

**“I dropped out because the pedometer was not counting accurately.”**

**“[The complementary] pedometer did not work; I had to get my own”**

Respondents were also asked whether or not they had worn their pedometer (either their own or a complementary pedometer) at least once since the Challenge ended. Nearly 40% (N=249) of respondents stated that they had worn their pedometer at least once since the Challenge ended, while 59% (N=372) respondents stated that they had not worn their pedometer post-Challenge.

### **Physical Activity Level**

Respondents were asked to report the number of minutes of moderate to vigorous activity in which they were engaged in a typical day before the Challenge began and after the Challenge ended. Examples of moderate to vigorous activity were provided (e.g., walking, jogging, weightlifting, swimming, yard work, dancing, and basketball).

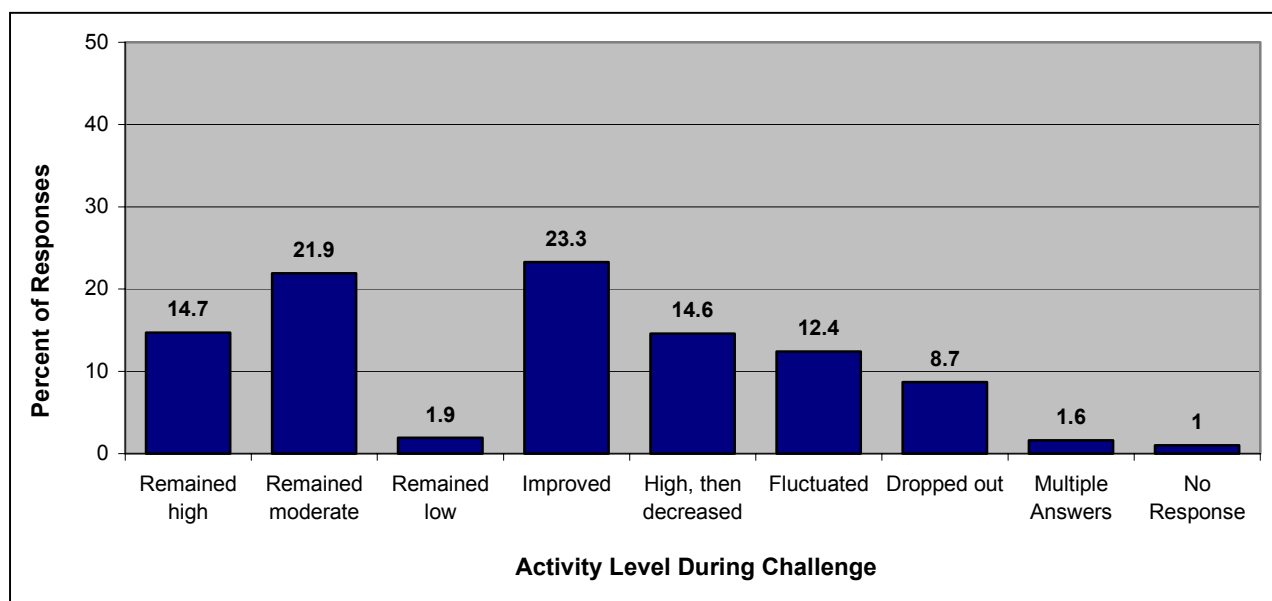
Table 4 shows the number of responses in each activity range before and after the Challenge. As hoped, the number of respondents reporting 20 to 39 minutes of activity per day increased from pre- to post-Challenge, while the number of respondent reporting less than 20 minutes per day decreased.

**Table 4: Change in Activity Level from Pre- to Post-Challenge**

| Activity Level                 | Pre-Challenge |            | Post-Challenge |            |
|--------------------------------|---------------|------------|----------------|------------|
|                                | Number        | Percent    | Number         | Percent    |
| Less than 20 minutes per day   | 241           | 38%        | 143            | 23%        |
| 20 to 39 minutes per day       | <b>253</b>    | <b>40%</b> | <b>307</b>     | <b>49%</b> |
| 40 minutes to one hour per day | 74            | 12%        | 117            | 19%        |
| More than one hour per day     | 40            | 6%         | 39             | 6%         |
| No Response                    | 23            | 4%         | 25             | 4%         |
| Total                          | 631           | 100%       | 631            | 100%       |

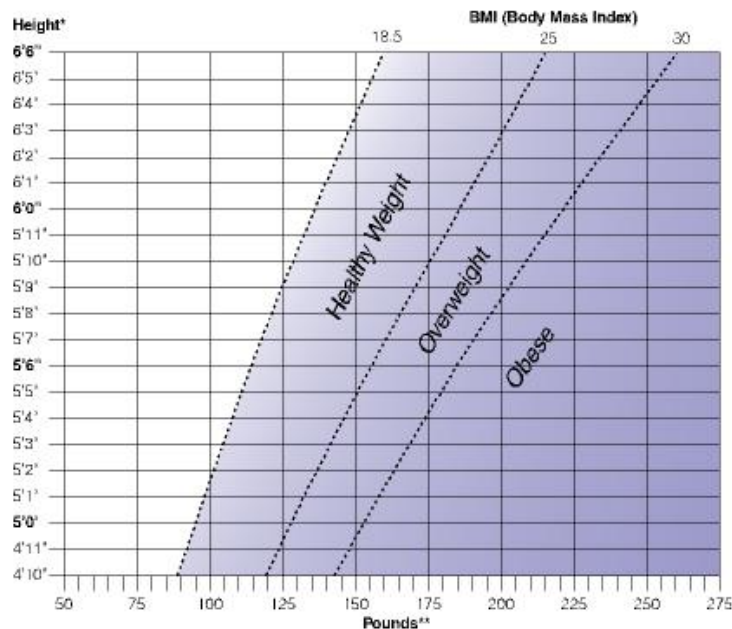
Respondents were also asked to describe their activity level during the Challenge. Approximately 23% of respondents reported an improvement in physical activity level. Almost 15% of respondents reported a higher level in the beginning followed by a decrease. And nearly 9% of respondents reported dropping out before the Challenge ended. The distribution of responses is shown in Figure 2 below.

**Figure 2. Participant Activity Level During the Challenge**



## Weight Status

Body Mass Index (BMI) is a measure of an individual's weight relative to their height that applies to both adult men and women and is used to predict the development of health problems related to excess weight. The measure is used by medical and public health professionals at the National Institutes of Health, National Heart, Lung, and Blood Institute, and Centers for Disease Control and Prevention to assess health risk. The BMI measure has several limitations, but is a reliable indicator of total body fat. The BMI chart and categories are shown below.



### BMI Categories:

Underweight: less than 18.5

Normal Weight: 18.5 - 24.9

Overweight: 25.0 - 29.9

Obesity: 30 or greater

The Challenge website featured a BMI calculator for participants to use as needed to calculate their BMI. Participants were not required to use this calculator or to provide height and weight data at the time of registration. Height, weight, and BMI data were not stored in the administrative database; nor could participants track change in BMI over time without going back to the calculator and re-entering height and weight data.

Respondents were asked to report their BMI, weight, and height both before and after the Challenge. Although weight loss/BMI change was not a primary goal of this Challenge, increases in activity are often related to weight loss. For many, weight is a sensitive subject, thus not surprisingly, between 28% and 35% did not respond to these questions, and between 35% and 43% of respondents provided incomplete answers that did not allow for a before and after comparison. Asking respondents to indicate which weight range they fall into may be a more appropriate way to collect this data in the future; however, it would not allow for calculation of BMI in cases where BMI is not provided by the respondent.

Of the 106 respondents that did provide a BMI score: six respondents reported an increase; 21 reported a decrease; and 63 stayed the same.

**Table 5: Self-report BMI before and after Challenge**

| Self-Report BMI        | Pre-Challenge |         | Post-Challenge |         |
|------------------------|---------------|---------|----------------|---------|
|                        | Number        | Percent | Number         | Percent |
| Under 20               | 9             | 1%      | 10             | 2%      |
| 20-24.9                | 50            | 8%      | 56             | 9%      |
| 25-29.9                | 30            | 5%      | 26             | 4%      |
| 30 or Above            | 17            | 3%      | 13             | 2%      |
| Don't Know/No Response | 525           | 83%     | 526            | 83%     |
| Total                  | 631           | 100%    | 631            | 100%    |

BMI was calculated during data entry for those respondents who did not report a BMI but provided a weight and height. Of those who provided weight measurements: 52 respondents reported an increase; 179 reported a decrease; and 129 stayed the same.

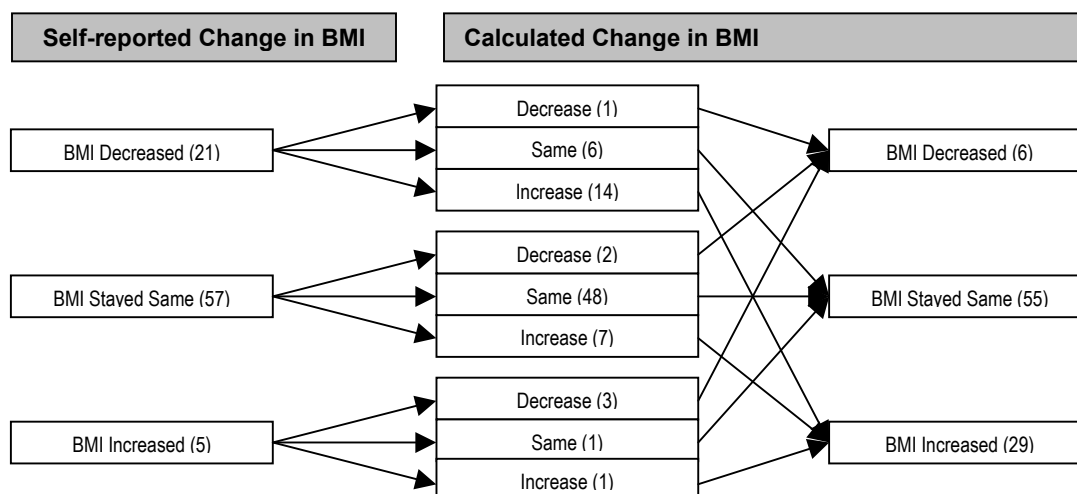
**Table 6: Calculated BMI before and after Challenge**

| Calculated BMI         | Pre-Challenge |         | Post-Challenge |         |
|------------------------|---------------|---------|----------------|---------|
|                        | Number        | Percent | Number         | Percent |
| Under 20               | 9             | 1%      | 8              | 1%      |
| 20-24.9                | 113           | 18%     | 115            | 18%     |
| 25-29.9                | 14            | 2%      | 14             | 2%      |
| 30 or Above            | 12            | 2%      | 11             | 2%      |
| Don't Know/No Response | 483           | 77%     | 483            | 77%     |
| Total                  | 631           | 100%    | 631            | 100%    |

In addition, 347 respondents reported that they did not know their BMI before the challenge. Of those, nine respondents reported knowing their BMI after the Challenge; 295 reported that they still didn't know their BMI after the Challenge.

The flowchart below illustrates the difference between respondents' self-report BMI change compared to the calculated BMI change (based on self-report weight and height provided) in the 83 respondents who reported both pre- and post-BMI, weight, and the same height. Most noticeable is the difference found in the group who reported a decrease in BMI. Of those 21, only one respondent actually decreased when calculated. This finding indicates possible misperceptions or inaccurate reporting on the part of some respondents and speaks to the need to provide clear, easy ways for participants to know and understand their BMI.

**Figure 3. Difference between reported change in BMI from pre- to post-Challenge and calculated change in BMI**



## Participation

Throughout the Challenge, participants were encouraged to increase their number of steps through several activities. Respondents were asked to indicate how often they participated in these activities (shown in Table 7). The most popular activities were taking the stairs, parking further away from entrances and walking after work.

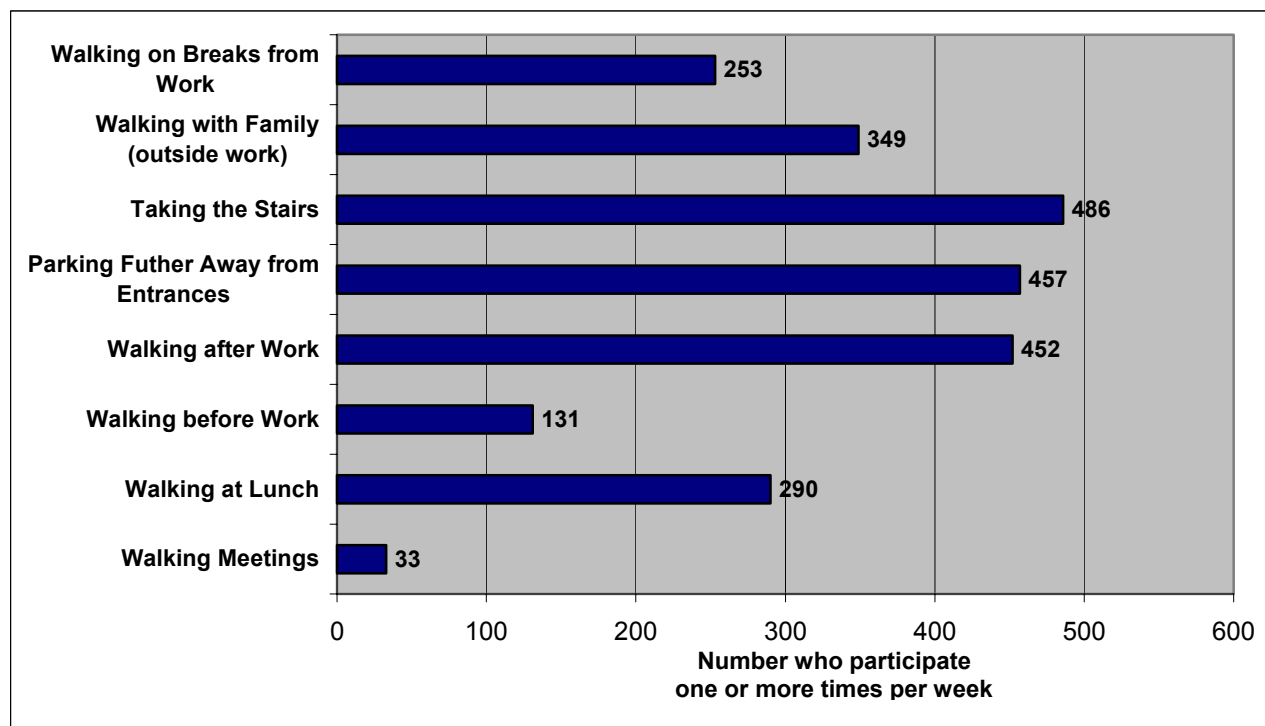
**Table 7: Participation in physical activities**

| Activities                          | Never | 1-2 times per week | 3 times per week | 4 or more times per week |
|-------------------------------------|-------|--------------------|------------------|--------------------------|
| Walking Meetings                    | 441   | 27                 | 3                | 3                        |
| Walking at Lunch                    | 232   | 192                | 50               | 48                       |
| Walking before Work                 | 371   | 55                 | 25               | 51                       |
| Walking after Work                  | 97    | 176                | 118              | 158                      |
| Parking Further Away from Entrances | 94    | 133                | 105              | 219                      |
| Taking the Stairs                   | 58    | 150                | 70               | 266                      |
| Walking with Family (outside work)  | 169   | 210                | 61               | 78                       |
| Walking on Breaks from Work         | 267   | 116                | 57               | 80                       |

“I like other exercise—especially swimming, biking, hiking.”

“Having a fitness center available to staff was very helpful in increasing and maintaining my activity level during the challenge period.”

**Figure 4. Participation in Activities to Increase Physical Activity**



## **Website**

The Challenge website was designed to allow participants the opportunity to enter their weekly step totals once per week. When asked how often they reported their steps on the Challenge website, the majority of respondents (72%) stated that they had reported their steps for nine or more weeks.

**Table 8: Use of Challenge Website to Report Weekly Step Totals**

| Frequency of Reporting Steps | Number | Percent |
|------------------------------|--------|---------|
| Less than 2 weeks            | 62     | 10%     |
| 3 to 8 weeks                 | 107    | 17%     |
| 9 or more weeks              | 432    | 68%     |
| No response                  | 30     | 5%      |

Respondents were asked to indicate their level of agreement with several statements about the website (shown in Table 9). Overall, respondents were satisfied with the Challenge website. The majority of respondents agreed or strongly agreed with the given statements.

**Table 9: Website Satisfaction**

| Website Characteristics  | Strongly Agree | Agree | Neutral | Disagree | Strongly Disagree | No Response |
|--|----------------|-------|---------|----------|-------------------|-------------|
| <i>The website was easy to navigate.</i>   | 210            | 281   | 52      | 17       | 6                 | 65          |
| <i>The website format and design was appealing.</i>  | 154            | 298   | 100     | 4        | 5                 | 70          |
| <i>The website provided the background and information and instructions that I needed to participate in the Challenge.</i> | 175            | 310   | 62      | 7        | 6                 | 71          |
| <i>The registration process was easy.</i>  | 208            | 305   | 38      | 10       | 4                 | 66          |
| <i>The process of entering my steps online was easy.</i>   | 247            | 244   | 42      | 18       | 11                | 69          |
| <i>I received adequate support when I had questions or problems.</i>   | 161            | 193   | 162     | 7        | 0                 | 108         |

## **Communication**

Respondents were asked to report how often they received communication from their Team Captain regarding the Challenge. About 37% of respondents reported receiving communication from their Team Captain at least once a week.

**Table 10: Communication from Team Captain**

| Frequency of Communication | Number | Percent |
|----------------------------|--------|---------|
| At least once a week       | 235    | 37%     |
| 1 to 3 times per month     | 113    | 18%     |
| Don't remember             | 110    | 17%     |
| No Response                | 173    | 27%     |
| Total                      | 631    | 100%    |

Respondents were also asked whether or not they recalled seeing motivational signs, posters, or reminders related to the Challenge (e.g., encouragement to use the stairs instead of the elevator or reminder to log steps) posted at their worksite. Thirty-seven percent of respondents recalled seeing these items.

**Table 11: Recall of motivational signs, posters, and reminders**

| Recall         | Number     | Percent    |
|----------------|------------|------------|
| Yes            | <b>236</b> | <b>37%</b> |
| No             | 217        | 34%        |
| Don't Remember | 58         | 9%         |
| No Response    | 120        | 19%        |
| Total          | 631        | 100%       |

Throughout the Challenge, the Challenge Coordinator sent email messages to team captains to distribute to their team members. The emails contained updates on team progress (e.g., participation rates, step totals, etc), tips for increasing activity and eating better, and announcements about prizes.

Respondents were asked if they read these weekly emails from their Team Captain or Challenge Coordinator. As seen in Table 12, the majority (73%) of respondents reported reading these emails. Several participants commented that they did not have access to email at work.

**Table 12: Reading of Weekly Emails**

| Read Weekly Emails | Number     | Percent    |
|--------------------|------------|------------|
| Yes                | <b>461</b> | <b>73%</b> |
| No                 | 137        | 22%        |
| No Response        | 33         | 5%         |
| Total              | 631        | 100%       |

As shown in Table 13, of those respondents who stated that they had read weekly emails, over half (59%) rated the content of those emails as “good” or “excellent.” Table 14 shows how respondents rated the nutrition information provided in emails and on the Challenge website. One respondent stated, “The weekly emails were very encouraging.”

**Table 13: Rating of Weekly Email Content**

| Rating      | Number     | Percent    |
|-------------|------------|------------|
| Excellent   | 73         | 16%        |
| Good        | <b>200</b> | <b>43%</b> |
| Adequate    | 56         | 12%        |
| Fair        | 22         | 5%         |
| Poor        | 6          | 1%         |
| No Response | 104        | 23%        |
| Total       | 461        | 100%       |

**Table 14: Rating of Nutrition Information Provided During Challenge**

| Rating          | Number     | Percent    |
|-----------------|------------|------------|
| Excellent       | 40         | 9%         |
| Good            | <b>144</b> | <b>31%</b> |
| Adequate        | 55         | 12%        |
| Fair            | 19         | 4%         |
| Poor            | 4          | 1%         |
| Didn't see/read | 84         | 18%        |
| No Response     | 115        | 25%        |
| Total           | 461        | 100%       |

### **Keys to Success**

Respondents were asked to identify both their keys to success and greatest obstacles to success in the Challenge. Table 15 shows the most frequently chosen keys and obstacles to success. Interestingly, pedometer usage, access to appropriate places to walk, and internal/self-motivation were seen as both keys to success and obstacles to success in the Challenge.

*Note: Respondents were given the option to write in a response in addition to choosing from a list of 14 options. A sample of those responses is shown in the shaded box below Table 15.*



**Table 15: Keys and Obstacles to Success**

|                        | Co-worker Support | Family/Friends Support | Incentives | Physical Ability | Worksite Climate | Time Availability | Access to place to walk | Weather    | Enjoyment of Walking | Pedometer Usage | Competition | Self-Motivation | Posters/Signs | Email Reminders | Other |
|------------------------|-------------------|------------------------|------------|------------------|------------------|-------------------|-------------------------|------------|----------------------|-----------------|-------------|-----------------|---------------|-----------------|-------|
| <b>Keys To Success</b> | <b>219</b>        | 132                    | 54         | 181              | 168              | 144               | <b>183</b>              | 166        | <b>317</b>           | <b>323</b>      | 84          | <b>343</b>      | 18            | 150             | 40    |
| <b>Obstacle</b>        | 21                | 20                     | 45         | 62               | 28               | <b>343</b>        | <b>99</b>               | <b>297</b> | 58                   | <b>106</b>      | 8           | <b>90</b>       | 18            | 8               | 53    |

**“Other” Responses (Keys to Success):**

“I had a strong incentive to make positive changes--sister's wedding.”

“Highly motivated team captain”

“Walking my dog”

“Newly diagnosed diabetic”

“My kids”

**“Other” Responses (Barriers to Success):**

“[I had] too many conflicts at home and work to be successful.”

“Christmas vacation was busy”

“The record keeping on the site was hard”

“Not being able to put old mileage in”

**Goal Setting**

Respondents were asked whether or not they set a goal for themselves at the beginning or anytime during the Challenge. Over 60% of respondents reported setting a goal. Examples of the goals they set are found below.

**Examples of Goals Set:**

**“To increase my level of activity”**

**“To walk 10,000 steps per day”**

**“To finish the challenge”**

**“Increase walking. No elevators.”**

**“Lose weight”**

**“To increase my activity level and eat healthier”**

**“Increase my average daily steps”**

**“I not only wanted to get 10,000 steps a day but also wanted to get my spouse involved in that goal.”**

In addition, respondents were asked whether or not they achieved their goal(s) by the end of the Challenge. As seen in Table 16, of the 381 participants who set a goal, just over half reported achieving that goal. Of the half that did not achieve their goal, 79% felt as if they were still successful.

**Table 16: Achievement of Goals**

|                  | <b>Yes</b> | <b>No</b> | <b>No Response</b> | <b>Total</b> |
|------------------|------------|-----------|--------------------|--------------|
| Goal Set         | <b>381</b> | 230       | 20                 | 631          |
| Goal Achieved    | <b>196</b> | 168       | 14                 | 381          |
| Still Successful | <b>133</b> | 28        | 7                  | 168          |

**Examples of why respondents felt successful despite achieving their goal(s):**

**“3 times per week I achieved over 10,000 steps”**

**“Because I did it on my own everyday”**

**“Because I stuck to the Challenge even while on vacation”**

**“Because I did not drop out”**

**“Because I’m still trying!”**

**“Heightened awareness of daily activity level”**

**“I am more active”**

**“I did try. I did much better than I thought I would.”**

**“I lost weight and although I didn’t exercise a lot over the holidays I am back on schedule and doing more”**

**“I still walk daily”**

**“Increased desire to exercise; established habit/pattern of daily activity.”**

### **Recommendations For Future Programs**

Respondents were asked a series of questions about program preferences. As seen in Table 17, over half (53%) of the respondents felt the length of this Challenge was appropriate while 35% felt it was too long.

**Table 17: Perception of Length of Challenge**

| Challenge Duration | Number     | Percent    |
|--------------------|------------|------------|
| Too Long           | 225        | 36%        |
| Too Short          | 21         | 3%         |
| Just Right         | <b>336</b> | <b>53%</b> |
| No Response        | 49         | 8%         |
| Total              | 631        | 100%       |

When asked whether they would participate in a program similar to the Public Health Steps Up Challenge again, an overwhelming majority (85%) said they would.

**Table 18: Intent to Participate in Similar Program**

|             | Number     | Percent    |
|-------------|------------|------------|
| Yes         | <b>538</b> | <b>85%</b> |
| No          | 70         | 11%        |
| No Response | 23         | 4%         |
| Total       | 631        | 100%       |

As seen in Table 19, when asked if a similar program were hosted, the majority of respondents indicated they would prefer to participate in the spring and/or summer months. Table 20 shows that the workplace was the most preferred location for a Challenge.

**Table 19: Preferred Season for Walking Program**

| Season           | Number     | Percent    |
|------------------|------------|------------|
| Spring           | <b>250</b> | <b>40%</b> |
| Summer           | 118        | 19%        |
| Fall             | 30         | 5%         |
| Winter           | 22         | 3%         |
| Multiple Answers | 141        | 22%        |
| No Response      | 70         | 11%        |
| Total            | 631        | 100%       |

**Table 20: Preferred Site for Walking Program**

| Site               | Number     | Percent    |
|--------------------|------------|------------|
| Church             | 9          | 1%         |
| School             | 11         | 2%         |
| Mall               | 11         | 2%         |
| Community Center   | 12         | 2%         |
| Work               | <b>386</b> | <b>61%</b> |
| Other              | 48         | 7%         |
| No Response        | 105        | 17%        |
| Multiple Responses | 52         | 8%         |
| Total              | 631        | 100%       |

### **Success Stories**

During the Challenge, participants were encouraged to submit stories about their experience in the Challenge, what kept them motivated, and how it has changed their life. These stories can be found in the Appendix. In addition, although the 16-week Public Health Steps Up Challenge officially ended in December, 2004, its momentum has continued for many. One team captain was so inspired by this Challenge that she created a new employee wellness program at her health department that has since resulted in a policy allowing staff 90 minutes of paid time each week for exercise. This story is also included in the Appendix.

## Lessons Learned

This section presents a summary of lessons learned throughout the Challenge and recommendations for planning future healthy lifestyle competitions, worksite wellness programs, or other programs like the Public Health Steps Up Challenge. These recommendations were formulated using feedback from Office of Surgeon General staff, Challenge participants, and team captains.

### **1) *Create worksite wellness groups to provide a supportive work environment and foster success in health promotion programs***

- Visible management support is critical to the success of any worksite wellness program (this includes management serving as a role model for healthy behavior)
- The State of Michigan/Office of the Surgeon General should create guidelines and tools for worksites to utilize
- The State of Michigan/Office of the Surgeon General should send a letter to worksite directors encouraging health promotion in the worksite
- Management should send a written message to employees encouraging participation in wellness programs such as the Public Health Steps Up Challenge
- Management should provide time during the workday for members of a worksite wellness group to plan & coordinate wellness activities (as opposed to being required to do this outside of work hours)
- Worksite wellness groups should surround employees with healthy choices and provide opportunities for employees to engage in physical activity and while at work (Examples include encourage walking on breaks and at lunchtime, using stairs instead of elevators, and parking further from the building; and providing healthy food options in worksite vending machines and cafeterias as well as during meetings)
- Worksites should assess their environment regularly in terms of policies related to healthy lifestyles and employee needs, and develop programs that meet those needs.

### **2) *Identify external funding sources early in the planning stage***

- The following are examples of Challenge-related items and activities that require some source of funding if internal resources do not currently exist:
  - Website development and maintenance
  - Staff to coordinate the challenge, respond to technical problems, communicate regularly with participants, conduct evaluation, and handle award distribution and any related event planning
  - Start-up packets for participants
  - Incentives, such as weekly drawing prizes, achievement awards, or other motivational products (e.g., hotel packages, fitness center memberships, apparel sporting goods, etc.). Encourage employees or worksite wellness team to seek donations from local businesses, and establish ongoing partnerships for future programs.
  - Recognition event and/or awards
  - Miscellaneous materials and mailing supplies/costs

### **3) *Provide a registration packet to program participants prior to the program start date***

- The following items should be provided to individuals once they register for the program:
  - Program information including the purpose of the program, who is eligible to participate, program start and end dates, rules and regulations, etc.
  - Pocket-size activity/healthy eating/other behavior journals to track progress

- Information about the website (if applicable) and procedure for technical problems
- Ideas for getting support from friends and family (e.g., finding a walking buddy at work and at home, etc)
- Pledge card that asks participant to pledge that if he/she feels like dropping out the program for any reason, he/she will notify the team captain
- The following items should be provided to team captains prior to the program start date:
  - Promotional flyers/posters to advertise program and to use as incentives throughout the duration of the program
  - List of registered team members & email addresses
  - Contact information for Coordinator and/or technical help

**4) *Collect baseline data at time of registration as well as follow-up data, including:***

- Brief personal health assessment (e.g., height, weight, BMI, current physical activity level, current consumption of fruits and vegetables, stages of readiness to increase physical activity level, etc)
- Include all anticipated data to be collected in any Human Subjects/Internal Review Board/Privacy Protocol applications and identify safeguards to protect participant identity and minimize risks to subjects.

**5) *Plan a local kick-off event (e.g., health fair, community walk, etc) as well as a celebration/recognition event afterward***

**6) *Collect participant success stories throughout the program and afterward, and if possible, share these stories with other participants and local media (note: program staff must obtain consent before sharing any personal information and/or identity)***

**7) *Send regular email messages to participants reminding them to record their steps, encouraging participation through difficult times (e.g., holidays or poor weather), and providing fun ideas for physical activity and healthy eating***

**8) *Encourage worksite/community competition as part of the program to encourage individuals or teams to excel***

**9) *Encourage employees who are already involved with worksite wellness programs to serve as the team captain***

**10) *Consider establishing a maximum number of participants for each team to keep it manageable for team captains (e.g., 15 team members)***

**11) *Establish protocols for handling organizations with multiple worksites, employees who travel frequently, documenting activity during vacations, what to do when ill, etc.***

**12) *Consider replacing number of steps taken with number of minutes spent in any physical activity or an option for those participants who prefer other activities instead of/in addition to walking***

**13) *Incorporate nutrition messages (e.g., healthy tips to fit 5-9 servings of fruits and vegetables into a busy day) into program materials and communication***

**14) *Invite team captains to participate in a teleconference with the Challenge Coordinator prior to the program start date to review program materials and policies and answer questions (also consider a mid-Challenge teleconference for update purposes)***

***15) Provide high-quality pedometers and instructions for use as part of start-up kit (or, if not possible, provide a coupon for purchasing a pedometer or list of retailers who offer a discount)***

## **Conclusion**

This evaluation has a number of limitations that should be considered before conclusions are drawn from the results presented in this report.

First, the data collected in this survey was self-report. Project staff were unable to compare survey responses to data in the Challenge database to verify self-report of items such as frequency of online step reporting, change in activity level during the Challenge, and more. In the future, it would be useful to somehow match survey respondents to their Challenge data as a means of verifying recall accuracy.

Second, most survey respondents were female and thus may not be truly representative of the Challenge population. However, because sex/gender was not collected during registration and actual representation of males and females in the Challenge population cannot be determined from the existing database, it is difficult to draw this conclusion. Females may have actually outnumbered males in the Challenge. In either case, future recruitment efforts should include messages designed to encourage male participation in both the Challenge and evaluation.

In addition, much of the personal health data collected in this survey was not collected at time of registration; therefore comparisons to baseline data cannot be made. The primary reason for not collecting personal health information at time of registration was lack of time. In order to expedite the Internal Review Board application and approval process in a timely manner to meet the proposed start date, project staff designed the registration process to collect the least amount of personal/private health information as possible.

Given the opportunity to create a similar program in the future and a larger budget, many of these limitations could be eliminated. For example, with more time to plan a program and more funding, a baseline survey could be administered at time of registration (via the website) or via email or mail shortly after registration.

Despite these limitations, the results presented in this report provide excellent feedback from program participants. These findings should be useful in planning similar physical activity challenges in the future. The results should also be beneficial in future efforts to obtain funding for similar challenges in Michigan. In general, program participants rated the program highly and said they would participate in a similar program in the future.

As the Recommendations section of this report highlights, management support and incentives are important aspects of any health promotion program. Individuals must understand the benefits of participating in a program and feel motivated and able to participate. Employers can also play an important role by encouraging employees to participate, offering incentives for participation, acting as role models, and initiating policies that support healthy lifestyles at work.

Finally, over half of the survey respondents stated that they had not worn their pedometer since the Challenge ended. Thus future programs should consider asking participants to create post-Challenge plans or goals and follow-up with motivational messages after the Challenge ends for some pre-determined length of time. In this case, the Public Health Steps Up Challenge Coordinator has sent a number of follow-up emails encouraging participants to continue living a healthy lifestyle, in particular, by participating in the Michigan Steps Up campaign. The Michigan Steps Up website provides tools for participants to set and track goals, much like what they did during the Public Health Steps Up Challenge.

## APPENDIX

We hope you enjoy these stories (printed with permission) about the ways in which the Challenge has affected participants' lives, helped them to meet personal goals, and in some cases, brought a few unexpected "adventures."

### **Story #1: *"I was starting to realize that I felt better than I had in years"***

#### ***Reality...***

On July 2, 2003, I found myself once again sitting on my living room couch with the TV on, feeling very tired, disillusioned with life and disconnected. I was pondering a discussion I had earlier that day with my spouse on "happiness." The sad thing was, I wasn't sure what really made me happy anymore. Somewhere along the way, I got lost in my busy life of mother, wife, employee, teacher, student, daughter etc. And I always put the needs of others ahead of my own.

#### ***The power to change...***

I've struggled my whole life with obesity, starting millions of diets in order to lose weight for a family wedding or an upcoming vacation, and I always failed miserably. On this day, it occurred to me that perhaps the way I had gone about losing weight was a failure; but I was not a failure. I am a competent, knowledgeable, and kind-hearted woman, who believed that I just needed to do things differently. And I firmly believe I have the power to make changes in my life, so I can be happier and healthier.

#### ***Prioritize!***

This is the day my priorities changed. I realized that it is my responsibility to be happy and healthy, so I got off the couch and went for a fifteen-minute walk. I was out-of-shape and breathless. But, instead of being critical and overwhelmed by it, I told myself, "Good job...tomorrow I'll go sixteen minutes!" My NEW #1 priority in life became MY health and happiness.

#### ***Lifestyle changes – reprogram one small step at a time...***

After two weeks of walking, I felt more energized, and felt good about myself. It was now time to re-evaluate my relationship with food. I had developed poor eating habits over the years, and my weight was over 300 pounds. I had been on so many diets in my life, and it was clear to me that I lacked an understanding of when I ate, why I would eat certain foods, what I was eating, and also the volume of food/calories I would consume in a day. I started a food journal, so I could be very specific in developing a plan to eat healthier. I decide to keep it simple, and I identified four new food habits I would implement on a weekly basis. These are the four changes:

- ***Drink water!*** In the first week of my new eating habits, I concentrated on drinking more water. I was getting good exercise, and I found myself thirsty. I eliminated soda pop and chose water. I made a habit of grabbing my water bottle, and drinking water throughout the day. I noticed that this helped me eat less.
- ***No eating after 8:00pm.*** The second week, I stopped late night eating. My food choices were usually high in fat, calorie dense, and lacked nutritional value. Also they were comfort foods; not related to true hunger. Late night eating had to go.
- ***Portion control.*** The third week, I needed to relearn what was a normal portion/serving size. I used a deck of cards to estimate a serving size. It was easy to do, and a very visual way to see a normal serving.

- *Eliminated fast foods.* By week four, I looked at my food choices and realized I needed to plan my meals, and not to eat on the run. Fast foods, in general, are loaded with fat and packed with calories. One of my most difficult changes came when I decided not to eat fast foods. They are so appealing and so easy to get. Instead, I just decided to look at food as energy or fuel for my body, and I knew that better choices were fruits, vegetables, baked or broiled fish or chicken. I started a favorite food list that included foods that were nutritious and foods that I liked. I then felt that I had a variety of healthy food choices that were great for my new energized body.

What amazed me was that it did not take long for my taste buds to adjust to my new way of eating, and that I was truly satisfied. For special occasions, if I wanted dessert or something I normally wouldn't eat, I developed a 'three bite' rule. The first three bites taste great, and then it just doesn't get better, so I stop after three bites. These were dietary habits that I could live with, and I was starting to realize that I felt better, than I had in years.

### **Story #2: "I no longer am a spectator, but a participant in life!"**

I have lost 135 pounds. That is ten dress sizes, from size 32 to size 12, and 72 inches of fat gone from my body.

*My health:* When I started my exercise program in 2003, I had a complete physical exam with my doctor. In less than one year, in addition to the weight loss, other health benefits to my body include:

- Blood pressure: From 144/88 to 100/70
- Resting pulse: From 80 to 40
- Cholesterol total: From 180 to 160
- My risk for diabetes or cardiovascular disease: From High to Low

*My fitness goals:* I went from walking 15-minutes to joining a running club. On October 31st, 2004, I ran my first marathon (26.2 miles). I now enjoy weight lifting, kickboxing classes, biking and so many other activities. And I am currently training for a triathlon. My physical activity used to be none existent, but now I average 1.5 HOURS DAILY.

*Happiness:* I like roller coasters, painting my toe nails, being in pictures, going to the beach, jumping on the trampoline with my children, and so many other things that I didn't realize before. My whole life is better. I no longer am a spectator, but a participant in life! We are meant to move and to live life to its fullest! It all started for me with a 15-minute walk, and I just stuck to it!

### **Story #3: "...it all starts with a commitment to prioritize your health and happiness..."**

The journey can begin for you too, because it all starts with a commitment to prioritize your health and happiness, the desire to reprogram some old thought patterns, and the willingness to take your first steps...today.

### **Story #4: "I lost my left leg to cancer in 1985, so walking is a big challenge for me"**

"Initially I was intimidated and at times still am with the 10,000 Steps a Day, because I am an amputee. I lost my left leg to cancer in 1985, so walking is a big challenge for me. What I am happy to say is that I have stuck with the STEPS UP Challenge, and continue to improve the number of steps I take each day.



While I may never get up to 10,000 steps in a day, I am definitely over 1,000 a day and close to 2,000 consistently each day. There are days I have broken 3,000+ steps, which is huge for me!

I am also 'eating healthier'. The Challenge was perfect timing for me, as I will be standing up with my sister in her wedding in June 2005. All I have to do is envision myself in the bridesmaid dress, and the motivation to continue both exercise and eating better is renewed! I have lost 20 pounds since the Challenge started, my stamina has improved tremendously (I'm no longer winded just walking to/from work), I sleep better, and an added bonus is that I no longer have GERD-gastroesophageal reflux disease.

I hope others continue to stay motivated in the Challenge. If you picture a goal in your mind's eye, it can help you to keep focused. And knowing that it is OK if you cannot reach 10,000 steps a day, and just sticking to it, makes you a winner!"

**Story #5: *"I am so glad to be out of the wheelchair and walking again"***

"I injured my back about the time this got kicked off. After many months of being unable to walk I had surgery on November 8th. On November 29th, I got the ok to begin introducing exercise back into my life. At first I could only walk to the end on my drive and back but day after day I increased and now I can clear at least three miles a day. The more I walk the stronger I am getting. I am so glad to be out of the wheelchair and walking again. I have a lot of steps to catch up on."

**Story #6: *"I am now able to jog two miles without stopping..."***

"I wanted to begin the walking competition because I had knee surgery in July 2003 and never got back into really getting back into shape. As a result, I gained 30 pounds in a year's time and knew if I didn't do something quick, I'd have another 20 on before the new year! I have taken the walking challenge very seriously and my pedometer is on the night stand at night and the first thing I attach to my pajama bottoms in the morning! I have lost 28 of those pounds during the competition and hope to get the last 2 off by the end of the challenge! I still have a long way to go to get all of the weight off that I want to in order to be healthy, but I am now able to jog two miles without stopping and hope to compete in my first 5K road race in the spring. Wish me luck!"

**Story #6: *"I bundle up, grab my flashlight and dog and take a walk..."***

"Years ago, I ran - everywhere, averaging 10 miles a DAY. I played every sport there is, some better than others. Old age and injuries caught up with me and depression grabbed my hand. Then I started walking and now all I do is walk - on breaks, at lunch and after work. I average eight miles a day of "extra walking". In the evening, after work, I bundle up, grab my flashlight and dog and take a walk to the corner. I live in the country, on a dirt road, so when I say to the corner; I mean a round trip of 1.5 miles. This takes about 15 minutes, gives me a chance to think about my day and gives Yoda some much-needed exercise. On weekends we walk around the block - a country mile - round trip of 4 miles. The dog loves it! I don't snack during the afternoons and I sleep better at night. I am trying to train Yoda to walk next to me on my treadmill; so on those truly nasty days he gets his exercise too. It's not working too well; he usually naps while I walk."

**Story #7: *"I heard a voice say, '4000 STEPS!!!'..."***

"I enthusiastically enrolled in the Michigan Steps Up Program using the pedometers which came with the enrollment. I soon found out that they didn't work all that well and after going through two of them, I decided to pay a visit to my nearest "Sports Authority" sports supply store. I purchased a shiny new pedometer which was described as being capable of recording, miles, steps and could also be used to sound an alarm if I got in trouble walking. I soon learned that all my degrees in Public Health didn't help me in programming the damn thing, but my secretary was easily able to get the thing started. That night while walking through a nearby subdivision (without streetlights), I heard a voice say, "4000 STEPS!!!" It scared me out of my wits until I realized that my new pedometer could also talk to me!!! I shall always remember the Michigan Steps Up Campaign as the time I was spoken to by an exercise angel while using a Pedometer!!"

**Story #8: *"I now take time to get on the floor and wrestle around with my kids..."***

"When I started working for the department, I had just had a baby a few months prior so weighed 168 lbs (and I'm only 5'3). I was going through a separation, and then divorce, from my husband. My two kids and I had to move back home with my parents. I was depressed, lazy and eating like it was going out of style. Then, I started working here and was introduced to the Michigan Steps Up Challenge. I got one of the free pedometers and started taking the stairs rather than the elevator. I started parking further away so I would have to walk more to get into the building. I started making "walking buddies" to walk with on breaks. I started eating a LOT healthier and only when I was hungry, not when I needed comfort. Now I weigh only 142 lbs, a 26 lbs loss in 2 ½ months. The depression is gone and I have a ton more energy than I did. I now take time to get on the floor and wrestle around with my kids, which I haven't done in quite some time. My kids and I have become closer because of it. I still would like to lose a few more pounds, but I now know that all it takes is eating right and moving!"

**Story #9: *"I haven't lost a pound as I thought I would, but who cares, I know I'm healthier..."***

"I am on my fourth pedometer by now." The first one, supplied by the Steps Up program, was not accurate, so I bought my own. I apparently "wore out" that one before its 30-day warranty even, and the hinge broke on the one succeeding it. My daughter thought that rubber-banded version was a little tacky, so my present one came all the way from Tennessee. When I accepted the Steps Up challenge, I never dreamed of the benefits I would eventually enjoy physically, mentally, and spiritually as well. I had always been fairly active compared to most my age; however, I didn't realize how inactive I'd allowed myself to become in later years. I started thinking of ways to increase my steps each day: walking while talking on my cordless/mobile phones; purposely parking some distance away from destinations; walking regimens on morning and afternoon breaks which have included stairways, two steps at a time; making more frequent trips to my boss' office with files, etc., and more frequent trips to the copy machine instead of allowing copying needs to build up; walking to my Saturday morning breakfast destination; and on and on I could go. One of the first things I noticed was my increased agility, including less pain, with regard to long-standing back and neck situations--a real praise. Thus, I've had fewer trips to the chiropractor, which have saved both the SoM and me some money! About the same time as I began Steps Up, in conversation with my son, who is serving our country in the Middle East right now, he told me once again that I needed to get away from so much caffeine and said that he had even given up Mountain Dew. I took that as another personal challenge and began weaning myself from so much regular coffee and caffeine-containing sodas. I now blend my coffee at home 25% regular/75% decaf, drink decaf when away from home, drink only caffeine-free sodas, and drink more water.

That was a major change in my lifestyle, which of course demanded that I get more sleep to compensate for the lack of "using" caffeine--another praise. This has all been a determined effort, which I know will show some real improvements when I have my next physical. Ironically, I haven't lost a pound as I thought I would, but who cares, I know I'm healthier, thanks to the challenge of Steps Up. Whether I wear my pedometer with the same determination after December 26, I don't know, but I WILL continue the healthier lifestyle I was challenged to begin."

**Story #10: *"...I DIDN'T know that participating would change my perspective about exercise"***

"Before this challenge started I was already an avid fitness enthusiast and was doing intense workouts 5 mornings a week lasting 1-1.5 hours. I didn't need to lose weight, and I didn't need to reduce my risk for chronic diseases because I was already healthy and in good shape. I participated in this challenge because I wanted to help out my team, and I figured with the exercise I was already doing that I my contribution would be a good boost to our "score". What I DIDN'T know was that participating would change my perspective about exercise. I knew that even moderate or low intensity exercise was beneficial, but I thought the only thing that counted as exercise for me was working out harder and harder every time. This sometimes gets to be mentally exhausting, not to mention the strain that overexercising puts on my joints and muscles. All in all, the mindset that I could only stay in shape by maintaining the level of exercise that was very intense is probably not the best life-fitness strategy. Until this challenge, I'd never taken the time to try something as low-impact as walking for exercise. But once I started being conscious of moving just a little bit more and taking some lunch-time walks during the week, I found that I was getting leaner, plus I felt refreshed and energized when I would return to work for the afternoon (and I didn't miss out on the beautiful fall weather!). Participating was a perfect experiment to demonstrate to myself the benefit of walking as exercise, and this experiment is going to be beneficial for me long-term."

**Story #11: *"The friendly competition brought out more walking between club members..."***

"We have an interesting group of employees who signed up for our team. One is a maintenance person, who is a high school basketball referee. He does at least three games per week and always wears his pedometer during these games. This created a competition between him and the nurse to see who walked the most steps per week. He has an average of 93,000 steps per week and he assumed he was the top walker in our team. He assumed he was far ahead of the rest of the team when the nurse informed him that she averages way over 120,000 steps per week! After not believing her, this brought out much joking between the two of them how the nurse's pedometer must be set up wrong to be registering the wrong amounts of steps. After examining the unit, he realized that the step settings just affect how many miles are registered, and not how many steps were taken. The nurse walks at least 3 miles in the morning before she comes to work, and at least 4 miles per night when she gets home! The friendly competition brought out more walking between club members to be the top team and the top walker in our own team."

**Story #12: *"...suddenly it dawned on me it was a bear climbing down the hillside onto the trail..."***

"I started the Health Dept. Steps Up Challenge in September. Due to the time of day I take my walk, and where I live, my "team mate" is the family dog, Missy. It did not take Missy very long to learn that when I walked out of the door in the evening, "we" were going for a walk. (At least someone was excited about all these steps.) Our walking route is the local Snowmobile/ATV trail that leads out into the woods. A regular nature walk. One evening in late September my walking partner and I headed out on the trail. The fall colors were at their finest, and the warm temperature was perfect for walking. I remember thinking how peaceful and gorgeous this night was."

Missy and I had only walked for about 20 minutes down this trail, when I happened to look up and see a black movement up ahead. I kept walking and watching; when suddenly it dawned on me it was a bear climbing down the hillside onto the trail. I stopped in my tracks. I sure didn't want the bear to notice us. I knew enough not to make any sudden moves, but of course, Missy decided to check out this 'new friend' and went to introduce herself. After calling to her multiple times, she realized that I was serious and decided to return to my side. After retrieving the dog, I walked backwards the way I came watching the bear to see what it was going to do. The bear decided we were not worth the trouble, and continued on its way. I decided to get the heck out of there, turned around and believe it or not, ran most of the way home. I didn't know I could run. Here I am learning the joys of walking, and I actually was running. Haven't done that activity since I was a kid. I believe that due to the weeks of 10,000 steps, I was able to. Hmmm, maybe I will take this activity to the next step, and try jogging!!!"

### **Story #13: *"The ultimate goal I am aiming for: a walking marathon"***

Health conscious is one way I would like to describe myself but I have to admit it is more than a challenge. I get lazy, snitch the wrong foods, and make excuses upon excuses. Time to lounge began to take precedence over exercise. Then came the Step Up Challenge.

I liked to walk and trot so I agreed to take on this recorded challenge. At first it was hard to remember to wear the pedometer but I soon learned to count those steps. It was slow starting at first. I got a boost with a couple visits to Chicago (where I walk all over that exciting city). But, I was still finding the excuse of being too busy, having too much homework to do and being way too tired.

The turning point finally hit me. Not only was I making up excuses, my health began to suffer. I was battling high blood pressure readings and gaining unwanted weight. These were things I controlled with regular exercise and eating better. I entered the danger zone- 'a wake up call.'

I started taking this health challenge more seriously. A good friend of mine told me about the walking marathon that she did and how she was in the best shape of her life when she trained for that. Hmmm. What a concept! I can be in shape by walking and I like to walk so I figured I just need to commit to the challenge, and I mean really commit. I joined my husband in the Core diet plan and he joined me in walking 4 miles every night. In 2 month's time I have managed to lose some weight, be in better shape, control my blood pressure, and stay healthy overall. Challenging? Very much so. I really do not like the cold weather but I bundle up every night (many layers) go for that walk. Exercise now take precedence and is a priority. I have obtained my goal of my masters degree and graduated so I truly have more time to stick with the Step Up Challenge. Not only am I walking, I jog two miles each morning and 3 miles on the weekends.

When I realized the number of steps I take in a week's time (what a surprise) with all this activity, I am more confident in reaching a bigger goal. The ultimate goal I am aiming for- a walking marathon. I know if I can keep up the pace of the Step Up Challenge I can complete 26.2 miles in a marathon. It seems like a lot of walking but it's all for the health of it and it's working.

### **Story #14: *"It is nice to know that we are doing the right thing everyday"***

Walking is like a hobby to me. When I heard that State of Michigan was having a walking challenge, I was overwhelmed. I had never used pedometer to record my steps. So it was a big challenge to me. I talked to my friends and coworkers at work to get a pedometer. I was quite excited to get it for free and see how many steps do I take on a normal day. Finally I got an e-mail telling us that we can get our free pedometers. We were ready to put our pedometers in action. Keeping the pedometer attached to the pants and at the proper place was a big challenge in itself. For a week we kept on struggling with those falling pedometers and counting those steps when the pedometer will get zeroed by itself.

The fun out of these things kept us going through it in spite of all those difficulties. Messages from those daily e-mails (Walktober) have kept us going through all sorts of times. It is nice to know that we are doing the right thing everyday. When a registered nurse tells us the benefits of walking, it certainly feels good. In short, I would like to say that walking has certainly uplifted my spirits and it encourages me to take some more steps everyday. I hope I keep up with this challenge till the end and still after the program is over.

**Story #15: *"Counting steps--what a novel and do-able approach to getting healthy"***

Counting steps--what a novel and do-able approach to getting healthy. We had many 'step' up to the plate to participate in this seemingly easy task. Then one of our nurses suggested that we go one 'step' further and monitor weekly weight checks to encourage weight loss. Every Monday those that wished to participate paid \$1 and were weighed in by a buddy. These weights were recorded on a chart to show our progress. The first week of step-up and weigh-in saw some 5# losses. We paid \$1 per week to weigh in and \$.25 for each pound gained. The money went into a "bank" with the highest loser receiving it at the end of the session. The winner was determined by figuring total BMI lost. The winner had a loss of 15# with two other participants close behind in pounds lost. The total pounds lost were #57.

Though this was an individual endeavor, it even benefited those that we provide services to. The pot ended up totaling \$82.00. This amount was then used to provide Christmas presents for a needy family serviced by our health department. What a blessing that our 'losses' could result in a 'gain' for someone else!

Thank you for providing the incentive to take these steps! Hopefully we will continue to see healthy gains in each of our life styles.

**Story #16: *"I want to continue making walking a top priority in my life"***

Last week my husband hurt his back and I have been helping him a lot! My walking has suffered. I must get into a new schedule adapting to these new time restraints. I can actually feel that my body is not well. I do not want all the old problems I used to have. I had gastrointestinal problems, felt stressed, ate a lot more, and moved very slowly. I am right now trying to prioritize my activities to be able to make a decision as to which ones I need to decrease so I can continue the same amount of walking as before. The stress of my husband's condition and its affect on me is greatly relieved by walking.

The airlines tell passengers to put on an oxygen mask first and then help others. Likewise, I want to continue making walking a top priority in my life, because I know it will help me stay healthy so that I can better care for my husband. Walking is a wonderful panacea and I know it and the encouragement by the Surgeon General to walk is a further motivator to not decrease that part of my life.

**Story #17: *"...90 minutes of paid time for staff to exercise each week"***

Your Steps Up program did light a fire in me...I have designed a newsletter called LAWS, which stands for Living and Working Successfully. LAWS entails every aspect of healthy living; including such topics as financial planning, time management, anger management, and many more. Healthy living is truly about being healthy physically, mentally, and spiritually. We need to address these issues; issues that sometimes get left in the dark at the workplace. We launched this program to our staff on April 1, 2005. The kickoff meeting included gifts such as a walking journal, water bottle, and new pedometer for each staff member. The response from the staff was overwhelming!

Our health department has also initiated, under the LAWS umbrella, 90 minutes of paid time for staff to exercise each week! Staff may exercise at home, at work, or at a fitness facility. Paid to exercise? You bet!! The response has been excellent. Our newsletters will be distributed monthly, and we will develop programs within LAWS. It is my hope, however, that this program expands within our health department and transforms from simply a 'program' to a paradigm shift. Events such as Michigan Steps Up only reiterate the idea again and again that we must turn the corner on responsibility for total health care. We must realize that it all begins (and ends) with our own enthusiasm (or in some cases simply willingness) to participate.

We will be launching a "Walk to Hawaii" next week. This walk will take place in six counties in our region. We are all looking forward to the luau at the end of the walk!!